

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES AND CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Data Points

RESULTS FROM THE 2008 CALIFORNIA WOMEN'S HEALTH SURVEY

eports from the U.S. Surgeon
General have stressed the
importance of improving mental
health treatment.¹ Treatment for mental
health problems is recommended
because it is effective and research has
demonstrated this effectiveness.¹ Although
a large proportion of adults in the United
States have not received treatment for their
mental health problems, there is evidence
that both mental health literacy and the
willingness to seek mental health treatment
have increased.²

The 1997 to 2000 and 2002 to 2008 California Women's Health Surveys (CWHS) included two questions on mental health treatment that were sponsored by the Department of Social Services. The first question asked respondents if they had wanted mental health treatment in the previous 12 months. If they answered yes to the first question, they were asked a second question about whether or not they received treatment. (Data from 2001 were not included in the analysis because the information from that year was not consistent with other years. In 2001, respondents were not first asked if they had wanted mental health treatment.) Using CWHS data from 1997 to 2000 and 2002 to 2008, this research examined trends in the prevalence of treatment for mental health problems by race/ethnicity among all women in California who felt the need for

treatment. Responses were weighted by age and race/ethnicity to reflect the 2000 California adult female population.

The analysis included a total of 10,762 women ages 18 and older who reported that they wanted mental health treatment in the previous year for the years 1997 to 2000 and 2002 to 2008. The number of women in the analysis by year is given in Figure 1.

A trend analysis was performed for all California women ages 18 and older and separately for Whites, African Americans/Blacks, Hispanics, and Asians/Others (see Figure 2). Trends were tested for statistical significance by fitting a logistic regression model for each race/ethnicity group.

Overall rates of mental health treatment have been increasing for all race/ethnicities except Whites. Between 1997 and 2000 the prevalence of mental health treatment exhibited great variation within all racial/ethnic groups. Between 2002 and 2008, a significant upward trend was found among all races/ethnicities except for Whites.³ African Americans/Blacks had a significant increase in the rate of treatment between 2003 and 2004 from 40.6 percent to 72.8 percent (*P* < .001), then remained fairly stable in subsequent years. Among Hispanics, the rate was lowest in 2002 (43.8 percent) and highest in 2006 (66.8

Receipt of Mental Health Treatment Among Adult California Women Wanting Treatment, 2008

California Department of Public Health Cancer Surveillance and Research Branch Survey Research Group Section

Public Health Message:

Although these results indicate an increase in the receipt of mental health treatment among minorities in California, in 2008 more than 30 percent of Whites, Hispanics and Asians/Others and more than 25 percent of African Americans/Blacks wanting mental health treatment did not receive treatment. This indicates that more efforts need to be made to provide ways for people who want treatment, to get the mental health treatment they need.

Figure 1

Women Ages 18 and Older Who Reported that They Wanted Mental Health Treatment in the Previous Year for the Years 1997 to 2000 and 2002 to 2008

1997	1998	1999	2000	2002	2003	2004	2005	2006	2007	2008
856	771	977	843	884	934	863	1072	1147	1302	1103

Source: California Women's Health Survey, 1997-2000, 2002-2008

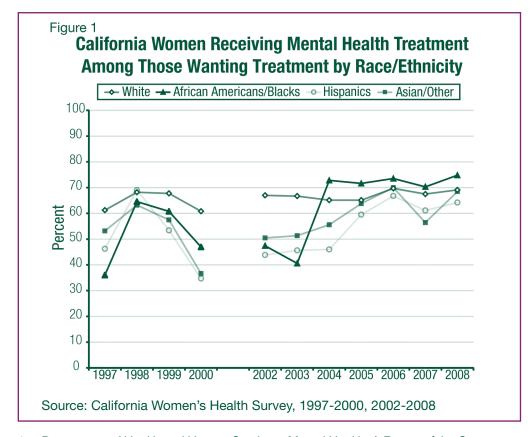
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California Department of Public Health Cancer Surveillance and Research Branch Survey Research Group Section percent; P < .05). Asians/Others had a pattern similar to that seen for Hispanics, but with slightly higher rates: the rate was lowest in 2002 (50.5 percent) and highest in 2006 (70.0 percent; P < .05). For Whites, the trend remained fairly stable throughout the years. The rate for Whites in 2002 was not significantly different than the rate for Whites in 2008 (67.0 percent vs. 69.1 percent, respectively).

Overall the results indicate that the percentage of adult California women

receiving mental health treatment among those wanting treatment has increased, particularly after 2001. This increase was significant among African Americans/ Blacks, Hispanics, and Asians/Others but not among Whites. These results indicate that the rates among African Americans/ Blacks, Hispanics, and Asians/Others are approaching the rates for Whites. In fact, in 2008 there were no significant differences between the rates for Whites, African Americans/Blacks, Hispanics and Asians/ Others.



- Department of Health and Human Services. Mental Health: A Report of the Surgeon General. 1999. http://www.surgeongeneral.gov/library/mentalhealth/home.html. Accessed August 2009.
- 2 Angermeyer MC, Holzinger A, Matschinger H. Mental health literacy and attitude towards people with mental illness: a trend analysis based on population surveys in the eastern part of Germany. Eur Psychiatry. 2009; 24(4): 225-232.
- The term "White" refers to Whites of Non-Hispanic origin.

Submitted by: Joan F. Epstein, M.S., California Department of Public Health, Cancer Surveillance and Research Branch, Survey Research Group, (916) 779-0114, jepstein@ccr.ca.gov